



Personally Furnishing Discharge Medications to Patients Leaving Correctional Facilities

Updated 7/14/2021

This policy document is intended to assist correctional facilities (jails, prisons, etc.) licensed by the Board of Pharmacy in providing medications to patients upon discharge.

For questions regarding personally furnishing medications, please review this guidance document. If you need additional information, the most expedient way to have your questions answered will be to e-mail the Board office by visiting: <http://www.pharmacy.ohio.gov/contact.aspx>.

This policy is being issued in accordance with a Board resolution adopted on May 5, 2020.

Discharge Medication Requirements

A prescriber may delegate the act of personally furnishing to a nurse licensed under Chapter 4723 of the Revised Code (RN/LPN) in a correctional facility, if the facility complies with all the requirements listed in this document.

Please be advised that this applies to medications that have been dispensed to the patient by an institutional pharmacy or medications that are removed from inventory (i.e., contingency stock) and provided to patients upon discharge.

Record Keeping

The correctional facility must maintain a record of all medications provided upon discharge. The records shall include the following: the name, strength, dosage form, and quantity of the drugs personally furnished, the patient name, and date of birth of the person to whom or for whose use the drugs were personally furnished, the positive identification* of the prescriber, pharmacist, or nurse (RN/LPN) providing the discharge medications, the date the drug is personally furnished and, if applicable, the date the drug is received by the patient.

The records must contain documentation of a valid prescriber order authorizing the medications to be personally furnished upon discharge. The records may be maintained as part of the patient's medical record or can be maintained in a separate log.

*Positive identification can include a wet-ink signature on a log or in a patient chart. For other forms of positive identification see rule [4729:5-5-01](#) (I).

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All records of personally furnishing discharge medications must be maintained for a period of three years from creation of the record.

Labeling

All drugs personally furnished must be labeled as follows:

1. The name of the ordering prescriber;
2. The name of the patient for whom the drug is intended;
3. Name and strength of the drug;
4. Directions for use;
5. Date furnished; and
6. Contact telephone where the patient can contact the prescriber or the prescriber's agent with any questions regarding the medication.

If the drug provided is a sample, only the following information must be included on the label:

1. The name of the ordering prescriber;
2. The name of the patient for whom the drug is intended;
3. Directions for use;
4. Date furnished; and
5. Contact telephone where the patient can contact the prescriber or the prescriber's agent with any questions regarding the medication.

NOTE: No additional labeling is required if the medication is already labeled by the institutional pharmacy and contains all the information listed above. If it does not, the correctional facility must append a supplemental label with the required information.

Preparation and Distribution of Discharge Medications

Pursuant to a valid order, a nurse (RN/LPN) or pharmacist may prepare and distribute discharge medications. A prescriber is not required to be on-site for the preparation and distribution of discharge medications. As part of the distribution process, a prescriber, nurse, or pharmacist will be responsible for verifying that the medication that is personally furnished matches the discharge order and that the label includes all the required information. **NOTE:** Use of a pharmacist for providing discharge medications is not considered dispensing. Rather, the pharmacist is working under the direction of a prescriber to personally furnish the discharge medications.

All medications for discharge must be secured and only accessible to prescribers, nurses, and pharmacists.

REMINDER: A nurse or pharmacist is not required to provide naloxone at discharge. This can be any appropriately trained staff person. For more information on naloxone distribution, please visit: www.pharmacy.ohio.gov/naloxone.

Counseling

The nurse, pharmacist, or prescriber personally furnishing discharge medication shall offer, or may provide in writing, the service of counseling to a patient whenever any dangerous drug is personally furnished. Counseling may be performed by a licensed pharmacist or prescriber in-person, by telephone, or by video conferencing.

Limits on Personally Furnishing Controlled Substances

Ohio law (ORC 4729.291) places the following limits on personally furnishing controlled substances:

- (1) In any thirty-day period, a prescriber cannot personally furnish to or for patients, taken as a whole, controlled substances in an amount that exceeds a total of two thousand five hundred dosage units*;
- (2) In any seventy-two-hour period, a prescriber cannot personally furnish to or for a patient an amount of a controlled substance that exceeds the amount necessary for the patient's use in a seventy-two-hour period.

IMPORTANT: Please be advised that this restriction **does not apply** to personally furnishing buprenorphine or methadone for the treatment of treating drug dependence or addiction.

*A dosage unit is defined as any of the following:

- (1) A single pill, capsule, ampule, or tablet;
- (2) In the case of a liquid solution, one milliliter;
- (3) In the case of a cream, lotion or gel, one gram; or
- (4) Any other form of administration available as a single unit.

For more information on the use of methadone for substance use disorder in the event of an emergency situation, please visit:

https://www.deadiversion.usdoj.gov/pubs/advisories/emerg_treat.htm